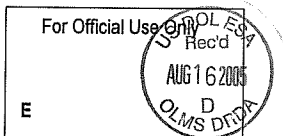


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 8476	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Daniel W Smallwood P.O. Box, Bldg., Room No., if any Street 2444 Hulett Drive City Decatur State Illinois ZIP Code + 4 62521-9263	4. Name, file number, and address of labor organization. Name Mid-Central IL Regional Council of Carpenters Labor Organization File Number 509-324 P.O. Box, Building and Room Number, if any Street #1 Kalmia Way City Springfield State Illinois ZIP Code + 4 62702-2057
5. Position in labor organization. Business Representative	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Daniel W. Smallwood

On

8-11-05

Date

(217) 428-0957

Telephone Number

Name of Person Filing Daniel Smallwood

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Becker & Galanti, P.C.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 488

Street 3673 Highway 111

City Granite City

State Illinois ZIP Code + 4 62040

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Christmas Gift of frozen steaks.

11.b. Approximate dollar value of such dealing.

\$48

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing Daniel Smallwood

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Appleton, Kretmar, Beatty & Stolze

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 8000 Maryland Avenue, Suite 900

City St. Louis

State Missouri ZIP Code + 4 63105

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

4 tickets to Sept. 4, 2004 Cardinal games against Los Angeles Dodgers.

11.b. Approximate dollar value of such dealing.

\$148

12.a. Nature of interest held or income received.

12.b. Amount.

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Ariel Capital Management, LLC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 200 East Randolph Drive, Suite 2900

City Chicago

State Illinois

ZIP Code + 4 60601

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

11.a. Nature of such dealing.

Golf Outing of July 20, 2004, including lunch, t-shirts, golfballs, and dinner.

11.b. Approximate dollar value of such dealing.

\$286

12.a. Nature of interest held or income received.

12.b. Amount.

Name of Person Filing Daniel Smallwood

File Number U-

Part B Continuation Page

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8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Independent Employee Benefits Corporation

Trade Name, if any:

P.O. Box, Bldg., Room No., if any P.O. Box 470

Street 28 N. First Street

City Geneva

State Illinois ZIP Code + 4 60134-0470

11.a. Nature of such dealing.

Expenses for Trustee Meetings on July 21 & 22, and Oct 19, 20, & 26.

11.b. Approximate dollar value of such dealing.

\$507

12.a. Nature of interest held or income received.

12.b. Amount.

Name of Person Filing Daniel Smallwood

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Central IL Carpenters H & W Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 200 S. Madigan Drive

City Lincoln

State Illinois ZIP Code + 4 62656

11.a. Nature of such dealing.

International Foundation meeting February 22-26, 2004 in Orlando, FL.

11.b. Approximate dollar value of such dealing.

\$2,268

12.a. Nature of interest held or income received.

12.b. Amount.

Name of Person Filing Daniel Smallwood

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

9. Business deals with:

☐ a. Labor Organization

☒ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Central IL Carpenters H & W Trust Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 200 S. Madigan Drive

City Lincoln

State Illinois ZIP Code + 4 62656

11.a. Nature of such dealing.

International Foundation Meeting in Monterey, CA on November 14-19, 2004.

11.b. Approximate dollar value of such dealing. \$3,371

12.a. Nature of interest held or income received.

12.b. Amount.